

**Alabama Trauma System
QI Workgroup Meeting
August 28, 2009 10:00 a.m. – 12:00 p.m.
Office of EMS & Trauma Conference Room
Montgomery, AL
1-866-465-2275 #2333**

In attendance: Choona Lang, Verla Thomas, Tammie Yeldell, Robin Moore, Dr. Campbell
By Phone: Alex Franklin, Geni Smith, Joe Acker, and Allan Pace
Not Present: Dr. Crawford, Beth Anderson, Spencer Howard

Choona opened the meeting with a welcome.

Trauma System Update

- All hospitals in the East and Gulf Regions have been surveyed.
- East and Gulf Regions hospitals are currently in the process of getting phone lines established for the installation of the software. All of Gulf hospitals phone lines will be in place by Monday, August 31.
- Gulf Region activation is scheduled for September 14, 2009. No date has been set for East.
- The Trauma System is currently moving forward in West and Southeast Regions.
- The West Region has only two hospitals that are equipped and qualified to participate in the trauma system. Glenn Davis has submitted a draft RTAC membership with a projected meeting to be scheduled for October 2009 and hospitals projected to be surveyed in November 2009.
- Southeast Region has 22 hospitals that will qualify and there are six hospitals currently scheduled for surveys.
- Choona and Dr. Campbell will visit Ford Medical Center in Rome, GA to discuss partnership with them for the Trauma System, since they do receive some patients from Alabama.
- All hospitals are projected to be surveyed by the end of the 2009 calendar year.
- East Alabama A Medical Center in Southeast Region is still expressing concerns about entering into the trauma system.
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Revise QI Process and Forms

Choona gave a brief review of the revised Alabama EMS & Trauma QI Plan Process and the other QI forms. All forms that will be used in the Trauma System will be sent to each region for use.

Changes made to the Alabama EMS & Trauma System QA/QI Improvement Plan Page 1 #2.B. #3 Participation in quarterly regional Aero-Medical QA/QI Committee (Membership decided by Region). (See attachments)

QI Report Project Update

Tammie gave a brief overview of the ATCC # Usage per the Trauma Registry ID Data Points. (See attachment)

Trauma Registry/DI Software Update

The software is currently in the testing phase and the deadline for testing is September 3, 2009. A retest will take place after DI has made the necessary changes found during the testing period. Pilot test is scheduled for September 14, 2009 and training for the facilities is scheduled for October 13-16, 2009.

Benchmark Update Phase II

Robin gave a brief overview of the Benchmark report. (See attached)

LifeTrac Software

Allan made a recommendation to add ticket numbers to each problem found in the LifeTrac Software so they can be referred back to for future reference.

NATS Update

NATS RTAC meeting was rescheduled until further notice.

Next Meeting

October 16, 2009 10:00 am – 12:00 pm

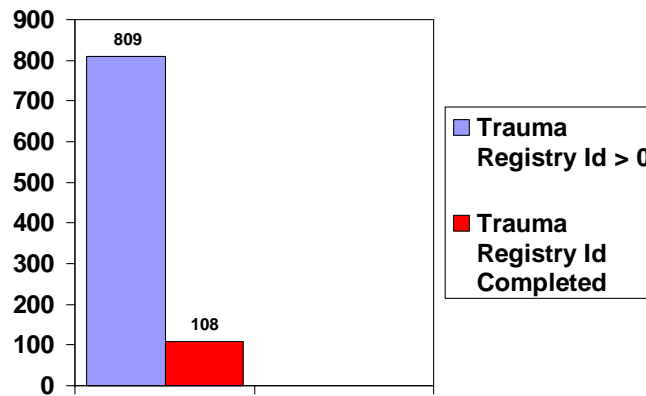
Meeting Adjourned 11:45 am

Meeting Recording WS111677

**ATCC# Usage Per the Trauma Registry ID Data Point
Alabama Electronic Patient Care Reports (ePCRs)
June 1, 2009 thru June 30, 2009**

- Approximately 550 ATCC Numbers were identified in Life Trac during the designated study period.
- In the ePCR database for the designated study period, around 800 records, where the Trauma Registry Id was greater than zero, were found.
- Of these approximately 800 records found in the ePCR database, slightly more than 13% had actual values.
- 24 emergency medical services providers requested the ATCC Numbers which were captured via the Trauma Registry Id datapoint in the ePCR database during the designated study period: #108(2), #110(1), #124(8), #136(2), #146(1), #168(2), #195(7), #216(1), #236(3), #238(2), #240(1), #252(5), #254(34), #270(2), #276(1), 377(1), #410(3), #584(1), #725(7), #924(5), #943(5), #944(7), #946(5), and #968(2).
- For those records where actual values were not entered into the Trauma Registry Id datapoint, the following is a listing of the other options entered: "700200", "800394", "NA", "Not Applicable", and "Not Known".

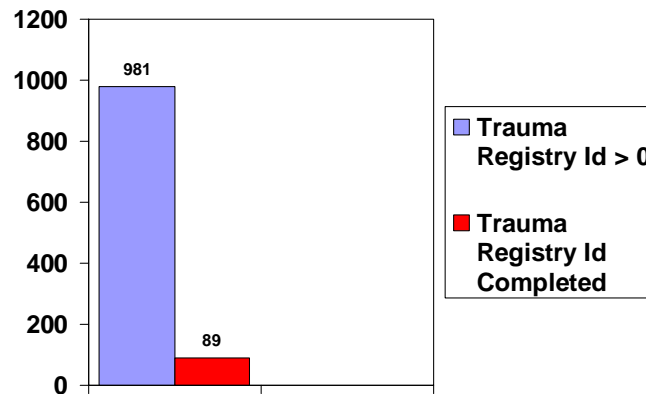
**ATCC# Usage Per the Trauma Registry ID Data Point
Alabama Electronic Patient Care Reports (ePCRs)
June 1, 2009 thru June 31, 2009**



**ATCC# Usage Per the Trauma Registry ID Data Point
Alabama Electronic Patient Care Reports (ePCRs)
July 1, 2009 thru July 31, 2009**

- More than 500 ATCC Numbers were identified in Life Trac during the designated study period.
- In the ePCR database for the designated study period, almost 1,000 records, where the Trauma Registry Id was greater than zero, were found.
- Of these approximately 1,000 records found in the ePCR database, slightly more than 9% had actual values.
- 21 emergency medical services providers requested the ATCC Numbers which were captured via the Trauma Registry Id datapoint in the ePCR database during the designated study period: #108(2), #124(6), #136(1), #168(1), #216(12), #236(2), #248(1), #252(5), #253(1), #254(30), #270(2), #276(1), 339(3), #410(2), #725(6), #864(1), #924(1), #943(2), #944(3), #946(2), and #968(5).
- For those records where actual values were not entered into the Trauma Registry Id datapoint, the following is a listing of the other options entered: "700200", "800394", "NA", "Not Applicable", and "Not Known".

**ATCC# Usage Per the Trauma Registry ID Data Point
Alabama Electronic Patient Care Reports (ePCRs)
July 1, 2009 thru July 31, 2009**



Alabama Department of Public Health
Office of Emergency Medical Services and Trauma
QA/QI Issues Feedback Report

QA/QI Issue: _____

Region: _____ Hospital: _____ Prehospital: _____

Service Provider: _____ Employee: _____

ATCC ID #: _____

Investigation Time Period: _____

State Office Recommendation:

Submission to Region Date

State Compliance Officer Signature

OEMS & T Medical Director Signature

OEMS & T Assistant Medical Director Signature

Alabama Department of Public Health Trauma System QA/QI Issue Tracking Log

Service Provider: _____ Employee: _____
Date of Occurrence: _____ Service Notification Date: _____
EMSP Involved Name _____ License# _____
Name _____ License# _____ Unit# _____

Noncompliance Issues: ___ I A ___ I B ___ II ___ III **Region** _____

Issue: _____

Service Findings: _____

Resolution: _____

Resolution Date: _____

Regional Staff Signature

Date

ATCC ID# _____

Alabama EMS & Trauma System Quality Assurance/ Quality Improvement Plan

Quality Assurance Plan

The mission of the quality assurance/quality improvement (QA/QI) plan is to assure optimal care of injured patients in the state of Alabama.

To accomplish this mission the QA/QI committee will continuously monitor the Statewide EMS & Trauma System utilizing system operation standards, system performance criteria, and data. The QA/QI process also includes development of system operation protocols, system performance standards, and system benchmarks. The process also includes the coordination of educational initiatives, system changes and enforcement as necessary.

QA/QI is made up of three component areas:

- 1) Standard Setting - the establishment of system operation protocols, system performance standards, and system benchmarks.
- 2) Quality Control - the “real time” operations of intervention by on-line medical direction, ADPH/OEMS&T, or the Alabama Trauma Communications Center (ATCC) to prevent sub-standard performance in any component of the ATS.
- 3) Quality Improvement - the use of system standards, quality control incidents, and data to determine the need for system change, provider education, or contract/regulatory action by the ADPH/OEMS&T.

The process is designed to allow all participants to recognize optimal as well as sub-standard performance. The process may use direct intervention, educational initiatives, system changes, and enforcement as necessary.

Alabama Trauma System QA/QI consists of the following:

- 1) Hospital
 - A. Quarterly internal audits
 - B. Alabama Trauma System Registry reports
 - C. Participation in quarterly regional QA/QI committee meetings
- 2) Pre Hospital
 - A. Air
 1. Internal Audits
 2. Participation in quarterly regional QA/QI committee meetings
 3. Participation in quarterly Aero-Medical QA/QI committee
 - B. Ground
 1. Internal Audits
 2. Participation in quarterly regional QA/QI committee meetings
 3. Participation in quarterly Aero-Medical QA/QI committee
- 3) ATCC
 - A. Assist all appropriate parties with their responsibilities as detailed in this plan.

- B. Provide Quality Control to assure ATS system operation protocols and ATS system performance standards are met with intervention as appropriate and incident reports made as necessary.
- 4) On-Line Medical Direction
- A. Provides on-line medical direction as necessary to assure compliance with ATS system operation protocols and ATS system performance standards.
 - B. Provides incident reports as necessary to the appropriate RTAC(s).
- 5) System
- The Alabama Department of Public Health's Office of EMS and Trauma is responsible for direct oversight and operation of the QA/QI plan:
- A. Assumes responsibility and accountability for the implementation and ongoing activities of the QA/QI process.
 - B. Establishes, maintains and provides guidance to STAC, RTAC, EMS Regional Staff and ATS QA/QI Committees.
 - C. Integrates the QA/QI process into activities for all levels of participation within the ATS.
 - D. Utilizes the QA/QI data to identify the need to make any changes to the ATS to ensure its success.
 - E. Communicates and cooperates with appointed RTAC QA/QI committee members to operate their QA/QI plan.
 - F. Reports all QA/QI plan activities to STAC and the State Committee of Public Health.
 - G. Establishes and maintains a systematic QA/QI assessment process.
 - H. Establishes a culture of excellence through leadership, education, communication and teamwork.
 - I. Forwards complaints received at the State level to the Regional staff for follow-up according to steps I, II, III and IV of the Trauma System noncompliance process listed under **Regional Trauma Advisory Council: Number 8.**

Regional Trauma Advisory Council (Staffed by Regional EMS Agency)

1. Utilizes regional level quality assurance/improvement, data process to identify the need to maintain/change trauma system processes by reporting findings to OEMS&T.
2. Communicates and cooperates with the direct services providers, ADPH/OEMS & T staff and all appropriate trauma system personnel to ensure Trauma System information is shared including the return of outcome data to the prehospital agencies involved in each patients care.
3. Promotes, coordinates and conducts ongoing prehospital and hospital ATS education.
4. Follows up with direct services providers to ensure trauma processes are performed.
5. Participates in all levels of the QA/QI process.
6. Meets quarterly with the State QA/QI committee to discuss ways to improve the ATS processes.
7. Receives all ATS QA/QI issues and then forwards to the ADPH/OEMS&T as well as State & Regional QI committees.

Non-Compliance Assurance

Reports **noncompliance** issues to the Regional Trauma Advisory Council as listed below for the ATS prehospital component:

I. First Issue

- A. Minor issues (misunderstanding, not yet trained, etc.): Explanation of issue and remedial education, documentation by regional staff. Copy to State OEMS & T Compliance Officer (for information only).

- B. Issues where service or provider does not respond or is uncooperative: to be forwarded to the OEMS & T Compliance Officer. (For appropriate actions by Compliance Officer).
- II. **Second Issue**-Verbal warning by regional staff. Issue will be forwarded to State OEMS & T Compliance Officer. State OEMS & T Compliance Officer will notify service provider and individual involved to schedule a counseling meeting.
- III. **Third Issue**-Verbal/written report will be forwarded to State OEMS & T Compliance Officer for investigation with possible licensure action taken.
- IV. State OEMS & T Compliance Officer will report all outcomes from findings to RTAC. A summary will be provided to the STAC.

EMS & Trauma Regions Noncompliance:

All regional EMS Agency noncompliance issues related to trauma system issues will be handled by the Director of the Office of EMS & Trauma.

Hospital Noncompliance:

All hospital noncompliance trauma system issues will be processed according to the contractual agreement with the hospital (*See Trauma System Contract for respective hospital*).

ATCC Noncompliance:

All ATCC noncompliance issues will be processed by the Director of the Office of EMS & Trauma and the ATCC Director.

RTAC QA/QI Committee Make Up

- I. Representation – Each RTAC QA/QI committee will have the following minimum trauma system components represented:
 - E911
 - ATCC
 - BLS First Responder
 - ALS First Responder
 - BLS Transport Provider (Only if BLS responds to 911 calls)
 - ALS Transport Provider
 - Trauma hospital of each level in the Region
 - Community Hospital
 - Emergency Medicine
 - Emergency Nursing
 - Trauma Surgeon
 - General Surgeon
 - Orthopedic Surgeon (if Level I or II in Region)
 - Neurosurgeon (if Level I in Region)
 - Trauma Coordinator from each level hospital in the ATS Region
- II. Membership – Each RTAC will determine and select the RTAC QA/QI membership to assure the above are represented. The Vice-Chair of the RTAC is to be the Chair of the RTAC QA/QI Committee.
- III. Meetings – The RTAC QA/QI committee must meet at least once each quarter. All meetings will be advertised to ATS staff.

**ALABAMA DEPARTMENT OF PUBLIC HEALTH
OFFICE OF EMERGENCY MEDICAL SERVICES AND TRAUMA**

IN THE MATTER OF:

ALABAMA LICENSE NO.)))	ALABAMA TRAUMA SYSTEM NONCOMPLIANCE
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The undersigned holder of licensure to practice as an Emergency Medical Service Technician in the State of Alabama is hereby notified _____ of the third trauma system noncompliance issue which has resulted in this written notification.

The undersigned holder of licensure to practice as an Emergency Medical Service Technician in the State of Alabama has 30 days to correct the noncompliance issue as listed below.

The Emergency Medical Technician will be reported to the State Compliance Officer for future investigation and/or possible license suspension.

Noncompliance Explanation:

EXECUTED this the _____ day of _____, 2008.

Name

Witness

**APPROVED AND ACCEPTED BY THE ALABAMA DEPARTMENT OF PUBLIC
HEALTH, OFFICE OF EMERGENCY MEDICAL SERVICES AND TRAUMA on this**

_____ day of _____, 2008.

Respectfully,

**John Campbell, M.D. Medical Director
Office of Emergency Medical Services and Trauma**

For Office use only

ATCC#_____ ATCC#_____

ATCC#_____

ATCC/Trauma System Issues QA/QI

Date:

ATCC#:

Occurrence Date: ____ **Time:** _____

Region: _____

Organizations Involved:

ISSUES(S):

- ☐ Patient not entered into system.
- ☐ Patient entered into system late.
- ☐ Physician did not come to telephone/radio for patient report and orders.
- ☐ Patient not transported to appropriate trauma center
- ☐ Patient transport designation issues
- ☐ Patient transport issue Statement added to document
 - ☐ Air ☐ Ground
- ☐ No PCR left at Hospital.
- ☐ Other: _____

Explain the occurrence fully below; do not just check box.